

AMENDED IN SENATE JULY 16, 2003

SENATE BILL

No. 393

Introduced by Senator Aanestad

February 20, 2003

An act to add Article 7.6 (commencing with Section 4128) to Chapter 9 of Division 2 of the Business and Professions Code, relating to pharmacists.

LEGISLATIVE COUNSEL'S DIGEST

SB 393, as amended, Aanestad. Pharmacists: inpatient pharmacy technician services.

Existing law, the Pharmacy Law, authorizes the California State Board of Pharmacy to regulate, license, register, and discipline pharmacists and pharmacy technicians. Existing law authorizes a pharmacy technician working in an inpatient hospital or a correctional facility to perform nondiscretionary tasks only while assisting, and while under the direct supervision and control of, a pharmacist.

This bill would authorize a general acute care hospital to implement and operate a program using specially trained pharmacy technicians to check the work of other pharmacy technicians who have filled floor and ward stock and unit dose distribution systems for patients whose pharmacy prescriptions have been previously reviewed by a licensed pharmacist. The bill would require a hospital that operates this program to keep a list of all qualified pharmacy technicians available for board inspection and to keep all required data in the hospital for at least 3 years.

Existing law makes it a misdemeanor to knowingly violate the Pharmacy Law. Because violations of this bill would be a misdemeanor, the bill would impose a state-mandated local program.

The California Constitution requires the state to reimburse local agencies and school districts for certain costs mandated by the state. Statutory provisions establish procedures for making that reimbursement.

This bill would provide that no reimbursement is required by this act for a specified reason.

Vote: majority. Appropriation: no. Fiscal committee: yes. State-mandated local program: yes.

The people of the State of California do enact as follows:

1 SECTION 1. The Legislature finds and declares that:

2 (a) Pharmacists have emerged as critical members of a medical
3 team by providing services such as patient education, drug therapy
4 monitoring, and pharmacokinetic consultations. Pharmacists
5 often work side by side with physicians and nurses, and participate
6 in medical rounds. Pharmacists play an integral role in ensuring a
7 safe medication use process. Through interpretation, evaluation,
8 and clarification of orders, pharmacists ensure the absence of drug
9 allergies, interactions, duplications, and the optimal selection of
10 dose, dosage form, frequency, route, and duration of therapy.

11 (b) There currently exists a shortage of pharmacists in the state,
12 and this shortage has the potential to cause harm to patients
13 because hospitals lack sufficient staffing to fully take advantage of
14 clinical pharmacy programs that have been shown to reduce the
15 number of medication errors in hospitals and improve patient
16 outcomes.

17 (c) Studies authorized by the California State Board of
18 Pharmacy, and conducted under the direction of the University of
19 California, San Francisco, at major California hospitals, have
20 established that certain nondiscretionary functions currently
21 performed by pharmacists in the hospital setting can safely be
22 performed by properly trained pharmacy technicians. Specifically,
23 allowing properly trained pharmacy technicians to check certain
24 tasks performed by other pharmacy technicians is a safe and
25 efficient use of staff, and frees pharmacists to provide the more
26 important and skilled clinical pharmacy services that are critical
27 to quality patient care and the reduction of medication errors.

28 (d) Pharmacists are substantially over-qualified for performing
29 these nondiscretionary inpatient checking functions, and current

rules that require pharmacists to perform these functions unnecessarily limit hospitals in their capacity to fully provide patients with clinical pharmacy services.

(e) It is the intent of the Legislature in enacting this act that pharmacists remain responsible for pharmacy operations. Nothing in these provisions should be interpreted to eliminate or minimize the role of pharmacists in directly supervising pharmacy technicians and pharmacy operations. It is the further intent of the Legislature that hospitals take advantage of the efficiencies created by these provisions by using properly trained pharmacy technicians for certain nondiscretionary checking functions and more completely utilize the training and skills of their pharmacist staff to implement and expand clinical pharmacy programs at their facilities.

SEC. 2. Article 7.6 (commencing with Section 4128) is added to Chapter 9 of Division 2 of the Business and Professions Code, to read:

Article 7.6. Inpatient Pharmacy Technician Services

4128. (a) Notwithstanding any other provision of law, a general acute care hospital, as defined in subdivision (a) of Section 1250 of the Health and Safety Code, may implement and operate a program utilizing specially trained pharmacy technicians to check the work of other pharmacy technicians in connection with the filling of floor and ward stock and unit dose distribution systems for patients admitted to the hospital whose orders have previously been reviewed by a licensed pharmacist. The hospital may implement and operate this type of a program if all of the following requirements are met:

(1) The hospital conducts ~~an ongoing~~ *a special* training program ~~pursuant to criteria the board, by regulation, has adopted for training pharmacy technicians. This criteria shall include both didactic and practical elements. Prior to adopting these regulations, the board shall approve a hospital's request to implement a pharmacy technician program if it is satisfied that the hospital has an adequate training program and meets the other requirements of this section.~~ *for technicians who perform the checking function that satisfies the requirements of subdivision (b).*

(2) The hospital conducts a continuous quality improvement program that, at a minimum, audits the performance of the specially trained pharmacy technicians at least every three months for the first year, and annually thereafter. A pharmacy technician whose audited accuracy rate falls below 99.8 percent shall not be permitted to check the work of other pharmacy technicians until he or she is requalified pursuant to paragraph (1).

(3) The hospital has a current nonprovisional, nonconditional accreditation from the Joint Commission on the Accreditation of Healthcare Organizations or another nationally recognized accrediting organization.

(4) The hospital pharmacy has been inspected by the board.

(5) The hospital establishes and maintains a program utilizing pharmacists to provide clinical services as described in Section 4052.

(b) The training program required by paragraph (1) of subdivision (a) shall include both didactic and practical elements, and shall specify requirements to be completed prior to the technician commencing participation in the checking program.

(1) The didactic component of the training shall consist of at least four hours of education covering the following topics:

(A) Information required to be on the label of unit dose or extemporaneous packaging.

(B) Identification of expired or contaminated medications.

(C) The product characteristics that need to be checked for each drug dispensed from the pharmacy.

(D) Special packaging or handling requirements, including refrigeration for certain medications.

(E) Generic names for common name-brand medications.

(F) Recognition and identification of various dosage forms.

(G) Common medical abbreviations and symbols used in pharmacy.

(H) Basic mathematical principles used in pharmacy calculations, including conversions between and within metric, avoirdupois, and apothecary systems.

(2) The practical component of the training shall consist of at least two hours of supervised practice in which the trainee both observes proper checking procedures and performs proper checking procedures under the direct observation of the supervisor.

(c) The board may, by regulation, establish other rules for hospitals utilizing specially trained pharmacy technicians ~~pursuant to this section. The board shall adopt regulations establishing the criteria described in paragraph (1) of subdivision (a).~~ *pursuant to this section.*

~~(e)~~

(d) The board may order a hospital to cease activities authorized by this section at any time a hospital fails to satisfy the board that it is capable of continuing to meet the requirements of this section.

~~(d)~~

(e) Data and records required by this section shall be retained in each participating hospital for at least three years.

~~(e)~~

(f) Medication that has been placed in floor or ward stock or unit dose distribution systems pursuant to this section shall not be administered to a patient except by a licensed health care provider practicing within the scope of his or her license.

~~(f)~~

(g) Legal responsibility or liability for errors or omissions that occur as a result of a pharmacy technician checking another pharmacy technician's work pursuant to this section shall be limited to the holder of the pharmacy permit and the pharmacist in charge.

4128.1. (a) Every hospital utilizing pharmacy technicians to check the work of other pharmacy technicians pursuant to Section 4128 shall maintain for inspection by the board a current list of all pharmacy technicians that have been qualified to perform checking functions.

(b) A pharmacy technician is not eligible to be qualified pursuant to this article unless he or she:

(1) Is currently certified by the Pharmacy Technician ~~Certifying~~ *Certification* Board.

(2) Is currently registered with the board as a pharmacy technician pursuant to Section 4202.

SEC. 3. No reimbursement is required by this act pursuant to Section 6 of Article XIII B of the California Constitution because the only costs that may be incurred by a local agency or school district will be incurred because this act creates a new crime or infraction, eliminates a crime or infraction, or changes the penalty

1 for a crime or infraction, within the meaning of Section 17556 of
2 the Government Code, or changes the definition of a crime within
3 the meaning of Section 6 of Article XIII B of the California
4 Constitution.

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